

Application Data Sheet

**Application Information**

Application number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?: None

Number of CD disks::

Number of copies of CDs::

Sequence submission?: Paper

Computer Readable Form (CRF)? Yes

Number of copies of CRF: 1

Title: METHODS OF TREATING INFLAMMATORY  
DISEASES ASSOCIATED WITH BONE  
DESTRUCTION (as amended)

Attorney Docket Number: 50026/055001

Request of Early Publication?: No

Request of Non-Publication?: No

Suggested Drawing Figure::

Total Drawing Sheets: 3

Small Entity?: No

Petition Included?: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?: No

### **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Japan

Status:: Full Capacity

Given Name:: Katsuo

Middle Name::

Family Name:: Sueishi

Name Suffix::

City of Residence::

State or Province of Residence:: Fukuoka

Country of Residence:: Japan

Street of mailing address:: 1-29-22, Ohike, Minami-ku

City of mailing address:: Fukuoka-shi

State or Province of mailing address:: Fukuoka

Country of mailing address:: Japan

Postal or Zip Code of mailing address:: 815-0073

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Japan

Status:: Full Capacity

Given Name:: Yoshikazu

Middle Name::

Family Name:: Yonemitsu

Name Suffix::

City of Residence::

State or Province of Residence:: Fukuoka

Country of Residence:: Japan

Street of mailing address:: 5-31-3, Najima, Higashi-ku,

City of mailing address:: Fukuoka-shi

State or Province of mailing address:: Fukuoka

Country of mailing address:: Japan

Postal or Zip Code of mailing address:: 813-0043

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Japan

Status:: Full Capacity

Given Name:: Akihisa

Middle Name::

Family Name:: Yamashita

Name Suffix::

City of Residence::

State or Province of Residence:: Fukuoka

Country of Residence:: Japan

Street of mailing address:: 202, Ridge C, 329, Chojabaru, Kasuya-machi

City of mailing address:: Kasuya-gun

State or Province of mailing address:: Fukuoka

Country of mailing address:: Japan

Postal or Zip Code of mailing address:: 811-2311

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Japan  
Status:: Full Capacity  
Given Name:: Akihiko  
Middle Name::  
Family Name:: Yoshimura  
Name Suffix::  
City of Residence::  
State or Province of Residence:: Fukuoka  
Country of Residence:: Japan  
Street of mailing address:: 2-7-2, Komorino,  
City of mailing address:: Kurume-shi  
State or Province of mailing address:: Fukuoka  
Country of mailing address:: Japan  
Postal or Zip Code of mailing address:: 830-0001

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Japan  
Status:: Full Capacity  
Given Name:: Mamoru  
Middle Name::  
Family Name:: Hasegawa  
Name Suffix::  
City of Residence::  
State or Province of Residence:: Ibaraki  
Country of Residence:: Japan

Street of mailing address:: c/o DNAVEC Research Inc., 25-11, Kannondai 1-  
chome,  
City of mailing address:: Tsukuba-shi  
State or Province of mailing address:: Ibaraki  
Country of mailing address:: Japan  
Postal or Zip Code of mailing address:: 305-0856

**Correspondence Information**

Correspondence Customer Number:: 21559

**Representative Information**

Representative Customer Number:: 21559

### **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National stage of	PCT/JP2004/002887	03/05/04

### **Foreign Priority Information**

Country::	Application Number::	Filing Date::	Priority Claimed::
JP	2003-075964	03/19/03	YES

### **Assignee Information**

Assignee name::

Street of mailing address::

City of mailing address::

State of Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::